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FAX TRANSMISSION

To	USPTO
Examiner	Thomas C. McKenzie, Ph.D.
Fax Number	(571) 273-8300
From	Karen E. Brown
Date	December 7, 2005
Application No.	10/035,823
Attorney Docket No.	VPI/99-01 CON US
	Status Inquiry
Total Pages	011

Message or Comment

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Attorney Docket No.: VPI/99-01 CON US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/035,823
Confirmation No.: 1783
Filing Date: October 23, 2001
Examiner: Thomas C. McKenzie, Ph.D.
Group Art Unit: 1624
Applicants: Francesco G. Salituro et al.
For: INHIBITORS OF c-JUN N-TERMINAL KINASES (JNK)

Certificate of Facsimile Transmission Under 37 CFR §1.8

I hereby certify that this correspondence and any documents referred to as attached hereto is/are being facsimile transmitted to the United States Patent and Trademark Office on December 7, 2005.

Typed or Printed Name

Signature

December 7, 2005
Cambridge, Massachusetts

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☒ a Status Inquiry; ☐ a Petition for Extension of Time; ☐ a substitute Specification; ☐ a Declaration; ☐ a Supplemental Declaration; ☐ a Power of Attorney; ☐ an Associate Power of Attorney; ☐ formal drawings; ☐ Notice of Appeal; ☐ Appeal Brief; ☐ Petition for Revival; to be filed in the above-identified patent application.

Applicants: Francesco G. Salituro et al.
Application No. 10/035,823

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

☐ A fee for additional claims is required.

The additional fee has been calculated as shown below:

CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	-	* =	X \$ 50	= \$ 0
INDEPENDENT CLAIMS	-	** =	X \$200	= \$ 0
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM		+	\$360	= \$
* If less than 20, insert 20.		TOTAL		\$ <u>0</u>
** If less than 3, insert 3.				

☐ A check in the amount of \$___ in payment of the filing fee is transmitted herewith.

☐ Please charge \$___ to Deposit Account No. 50-0725 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.

Applicants: Francesco G. Salituro et al.
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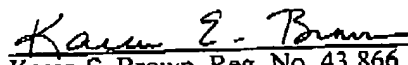
EXTENSION FEE

- ☐ The following extension is applicable to the Response filed herewith; ☐ \$120.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); ☐ \$450.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); ☐ \$1,020.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); ☐ \$1,590.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136(a); ☐ \$2,160.00 within fifth month pursuant to 37 C.F.R. § 1.136(a).
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MISCELLANEOUS FEES

- ☐ Please charge \$_____ to Deposit Account No. 50-0725 in payment of the for _____ (37 C.F.R. § _____).

Respectfully submitted,


Karen E. Brown, Reg. No. 43,866
Attorney/Agent for Applicants
c/o Vertex Pharmaceuticals Incorporated
130 Waverly Street
Cambridge, Massachusetts 02139
Tel: (617) 444-6168
Fax: (617) 444-6483

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Lisa Romano
Typed or Printed Name
[Signature]
Signature

December 7, 2005
Cambridge, Massachusetts

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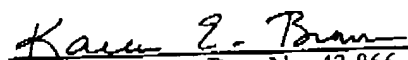
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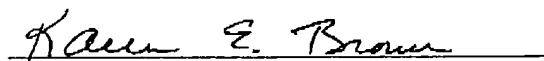
STATUS INQUIRY

Sir:

Applicants respectfully inquire as to the status of the above-identified application. No communication has been received since a Petition to Revive an Unintentionally Abandoned Application was filed June 2, 2005.

No fee is deemed necessary in conjunction with the filing of this paper. However, if a fee is required, the Director is hereby authorized to charge any fees due to Deposit Account No. 50-0725. A duplicate copy of this paper is enclosed herewith.

Respectfully submitted,



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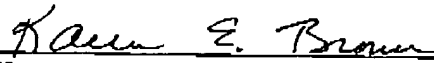
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